

FORM
PFD

For office use only

## **Iowa Ethics and Campaign Disclosure Board**

Required by Iowa Code section 68B.35, 68B.3(2), and rules in 351 - Chapter 7.

Personal Financial Disclosure Statement
Name: Robert J. Denson
Please type or print legibly
Agency or department: Des Moines Area Community College
Position held: President/CEO
Statewide office sought (non-incumbent candidates only): None
This statement is for Calendar Year 20 08. Check if this is an amended statement.   This statement is required to cover the calendar year preceding the year the report is due.
General instructions: Complete each of Parts A, B, and C below. Attach additional pages if necessary.
Part A. Business, Occupation, or Profession. By position or job title, list each business, occupation, or profession in which you were engaged during the previous calendar year, including the name and nature of each business or employer. If you were not employed by anyone other than the agency and for the position held above check here. ✓
1
Part B. Income sources of more than \$1,000. In the categories below list each source from which you received more than \$1000 in gross annual income during the previous calendar year. The amount or value of the holding is not required to be listed. This includes the total amount of any income received jointly with one or more persons exceeding \$1000. Do not report income received solely by your spouse or other family members. A source is reportable if the gross income produced was subject to federal or state income tax during the reporting period. If you have nothing to report under Part B check here.
1. Securities. List any company in which you owned securities
1.
2

ncome such as certificates of deposit or savings accounts.	
. CDs with various banks	
Savings and checking accounts	
Trusts. State the nature or type of the trusts.	
Irrevocable trust interest	
<b>Real Estate</b> . List the nature of real estate interests including an interest firrived from the selling of property. Do not list the location, address, or legal d	
1/4 interest in family farm in Iowa	
Small real estate limited partnership	
Retirement Systems. List the name of the employer/sponsor of any retire	rement benefit system.
State of Florida Retirement System	
Sales to political subdivisions. List any sales of a good or service to a poate if a commission from the sale was received.  None	
Other. List other sources of annual gross income not reported above that urposes.	were reported for tax
None	
art C. Certified Signature.	
I certify that this statement is true and accurate to the best of my known	wledge. I understand tha
am subject to potential civil and criminal penalties for failing to file an accura	_
file this statement by the required due date.	
	, a
1-9	7-7
(Signature of person filing statement) (Date)	